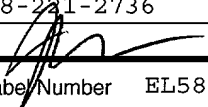
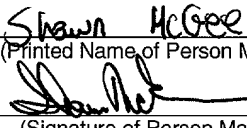


12-22-00

PTO/SB/05 MODIFIED BY AT&T CORP.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	1999-0543		Total Pages	
		First Named Inventor or Application Identifier				
		Jayson Newlin				
		Express Mail Label No.	EL580482988US			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231			
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 15] <small>(preferred arrangement set forth below)</small> - Descriptive title of invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings(if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 2 (informal)] 4. Oath or Declaration [Total Pages 4] a. <input checked="" type="checkbox"/> Newly executed (original or copy) (unsigned original) b. <input type="checkbox"/> Copy from a prior application(37 CFR 1.63(d)) <small>(for continuation/divisional with Box 15 completed)</small> <small>[Note Box 15 below]</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b)</small>			5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy(identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Assignment Papers(cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement(IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 13. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 14. <input checked="" type="checkbox"/> Other : Request and Certification Under 35 U.S.C. 122(b) (2) (B) (i)			
15. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No: Prior application information: Examiner: _____ Group/Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
16. CORRESPONDENCE ADDRESS						
<input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or <input checked="" type="checkbox"/> Correspondence address below						
NAME		Samuel H. Dworetzky				
ADDRESS		AT&T CORP. P.O. Box 4110				
CITY		Middletown		STATE	New Jersey	ZIP CODE 07748-4110
COUNTRY		United States of America			FAX	732-368-6932
17. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
NAME		Jeffrey M Navon			Reg. #	32711
TELEPHONE		908-221-2736				
SIGNATURE					DATE	12/21/00
"Express Mail" Mailing Label Number EL580482988US Date of Deposit						
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. , 20231						
Shawn McGee <small>(Printed Name of Person Mailing Paper)</small>  <small>(Signature of Person Mailing Paper)</small>						

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**REQUEST AND CERTIFICATION
UNDER
35 U.S.C. 122(b)(2)(B)(i)**

First Named Inventor

Jayson Newlin

Title

Methods and Dystems for Communicating
and Controlling Facsimile Information

Atty Docket Number

1999-0543

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

12/21/00
Date


Signature

Jeffrey M. Navon

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

35 U.S.C. 122(b)(2)(B)(i)
09/745209
12/21/00

FEE TRANSMITTAL		Complete if Known	
Patent Fees are subject to annual revision.			
TOTAL AMOUNT OF PAYMENT		Application Number	
746.00		Filing Date	
		First Named Inventor	Jayson Newlin
		Examiner Name	
		Group/Art Unit	
		Attorney Docket No.	1999-0543
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES	
Deposit Account Number 01-2745		Large Fee Code Entity Fee(\$)	
Deposit Account Name AT&T CORP.		Fee Description Fee Paid	
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17		<input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance	
FEE CALCULATION			
1. FILING FEE			
Large Fee Code Entity Fee(\$)			
Fee Description Fee Paid			
101 710 Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee		710	
106 320 Design Filing Fee			
108 710 Reissue Filing Fee			
114 150 Provisional Filing Fee			
SUBTOTAL (1)		0	
2. CLAIMS			
<input type="checkbox"/> Filing Under 37CFR 1.53 (b)			
<input type="checkbox"/> CPA Under 37CFR 1.53 (d)			
<input type="checkbox"/> Amendment			
Extra Claims Fee from below Fee Paid			
Total 22 - 20 = 2 X 18 = 36			
Ind. 3 - 3 = 0 X 80 = 0			
Multiple Dependent Claims 36 = 0			
Large Fee Code Entity Fee(\$)			
Fee Description			
103 18 Claims in excess of 20			
102 80 Independent Claims in excess of 3			
104 270 Multiple Dependent Claims			
109 80 Reissue independent claims over original patent			
110 18 Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)		36	
SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name Jeffrey M Navon		Reg. Number 32711	
Signature		Date 12/21/00	
		Deposit Account User ID	